

## **Application Data Sheet**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	INHIBITORS OF TGF $\beta$
Attorney Docket Number::	219002029400
Request for Early Publication?::	No
Request for Non-Publication?::	No
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	United Kingdom
Status::	Full Capacity
Given Name::	Jonathan
Family Name::	AXON
City of Residence::	Sunnyvale
State or Province of Residence::	CA
Country of Residence::	US
Street of mailing address::	1220 North Fair Oaks Avenue
City of mailing address::	Sunnyvale
State or Province of mailing address::	CA
Postal or Zip Code of mailing address::	94089

Applicant Authority Type::	Inventor
----------------------------	----------

Primary Citizenship Country:: India  
Status:: Full Capacity  
Given Name:: Sarvajit  
Family Name:: CHAKRAVARTY  
City of Residence:: Mountain View  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of mailing address:: 1888 Miramonte Avenue  
City of mailing address:: Mountain View  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 94040

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Sundeep  
Family Name:: DUGAR  
City of Residence:: San Jose  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of mailing address:: 5943 Sterling Oaks Drive  
City of mailing address:: San Jose  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 95120

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Glen  
Family Name:: MCENROE  
City of Residence:: San Mateo  
State or Province of Residence:: CA

Country of Residence:: US  
Street of mailing address:: 3367 Kimberly Way  
City of mailing address:: San Mateo  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 94403

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: United Kingdom  
Status:: Full Capacity  
Given Name:: Alison  
Family Name:: MURPHY  
City of Residence:: Milpitas  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of mailing address:: 1732 Grand Teton Drive  
City of mailing address:: Milpitas  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 95035

#### **Correspondence Information**

Correspondence Customer Number:: 25225

#### **Representative Information**

Representative Customer Number:: 25225

#### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Application claiming the benefit under 35 USC 119(e)	60/409,870	09/10/02